

2008 ELECTION CYCLE  
CPR - SS 08-01(b)

**CANDIDATE REPORT OF 2008  
RECEIPTS AND DISBURSEMENTS**



Name of Candidate MARK BAKER  
Address 244 Dominion Parkway Brandon, MS County Randolph  
Telephone (Work) 601.824.7455 (Home) 601.824.3297 (Fax) 601.824.7456  
Contact Name Mark Baker Email Address mbakerlaw@comcast.net  
Office Sought Representative District 74 Political Party Republican

☐ Check here if above is different from previous report

**TYPE OF REPORT**

• CHECK THE CATEGORY OF REPORT YOU ARE SUBMITTING •

- ☐ October 28, 2008 Pre-Election Report (January 1, 2008, through October 25, 2008).....Mandatory  
☐ November 18, 2008 Pre-Runoff Report (October 26, 2008, through November 15, 2008).....Runoff Candidates  
☒ January 31, 2009 Annual Report (January 1, 2008, through December 31, 2008).....Mandatory  
☐ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt or obligations.) Required to terminate reporting obligations

**IMPORTANT**

- (1) Periodic reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.  
(2) Until a candidate files a termination report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).  
(3) The appropriate office must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.  
(4) Contributions in excess of \$200 received after the reporting period but more than 40 hours before 12:01 a.m. on the day of the election must be reported by FAX or otherwise within 48 hours of the contribution. Use separate form "48 Hour Report" to report such activity.

**REPORTED CONTRIBUTIONS AND DISBURSEMENTS**

	(itemized + non-itemized)	Total This Period	Calendar year-to-date
Total amount of contributions \$	10,842.48 + \$ 200.00	\$ 11,042.48	\$ 11,042.48
Total amount of disbursements \$	7,578.59 + \$ 1,288.92	\$ 8,867.51	\$ 8,867.51
Total amount of cash on hand		\$ 24,614.98	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

(Signature of Candidate)

(Date)

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 812 (1972).

- SEND TO:**
1. Candidates for statewide, state district, multi-county and all legislative offices should return form to Delbert Hosemann, Secretary of State, Elections Division, P.O. Box 136, Jackson, MS 39205 or fax to 601-359-1499 or 601-576-2819.
  2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Page 1 of 1Name of Candidate or Committee Mark BakerReporting period 1/1/08 through 12/31/08

## ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>IPAC</u>		<u>2/7/08</u>	\$ <u>9,642.48</u>
Mailing Address <u>P.O. Box 347</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Brandon, MS 39043</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>9,642.48</u>
B. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>ATST MS Political Action Committee</u>		<u>6/9/08</u>	\$ <u>200.00</u>
Mailing Address <u>175 E. Capital St.</u>		<u>11/10/08</u>	\$ <u>500.00</u>
City, State, Zip Code <u>Jackson, MS 39201</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>MS Dental PAC</u>		<u>9/9/08</u>	\$ <u>500.00</u>
Mailing Address <u>2630 Ridgewood Rd</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39216</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		<u>1/1/</u>	\$
Mailing Address		<u>1/1/</u>	\$
City, State, Zip Code		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$



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Name of Candidate or Committee

Mark Baker

Reporting period

1/1/08

through

12/31/08

## ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>V.S. Network</u>	<u>7/21/08</u>	\$ <u>49.00</u>
Mailing Address	<u>7/8/08</u>	\$ <u>3079.60</u>
<u>6360 1-55 N, Suite 310</u>		
City, State, Zip Code	<u>12/12/08</u>	\$ <u>599.25</u>
<u>Jackson, MS 39211</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Campaign to Re-elect Jim Smith</u>	<u>10/19/08</u>	\$ <u>500.00</u>
Mailing Address		
<u>P.O. Box 320366</u>	<u>1/1/08</u>	\$
City, State, Zip Code		
<u>Flowood, MS 39632</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Dartmouth County Republican Executive Comm. Here</u>	<u>7/15/08</u>	\$ <u>750.00</u>
Mailing Address		
<u>4 Riverbend Place, Suite 110</u>	<u>1/1/08</u>	\$
City, State, Zip Code		
<u>Flowood, MS 39632</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Muscadine Jubilee</u>	<u>7/21/08</u>	\$ <u>250.00</u>
Mailing Address		
<u>P.O. Box 229</u>	<u>1/1/08</u>	\$
City, State, Zip Code		
<u>Oshtatchie, MS 39145</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
	<u>1/1/08</u>	\$
Mailing Address		
	<u>1/1/08</u>	\$
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
	<u>1/1/08</u>	\$
Mailing Address		
	<u>1/1/08</u>	\$
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

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## ITEMIZED DISBURSEMENTS

A. Full name <u>Rankin Publishing Inc.</u>	Date (Mo., Day, Year) <u>1/19/08</u>	Amount of each disbursement this period <u>\$ 60.00</u>
Mailing Address <u>P.O. Box 5507</u>	<u>6/13/08</u>	<u>\$ 50.60</u>
City, State, Zip Code <u>Brandon, MS 39047</u>	<u>7/17/08</u>	<u>\$ 304.24</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name <u>Green Floral Inc.</u>	Date (Mo., Day, Year) <u>2/12/08</u>	Amount of each disbursement this period <u>\$ 73.72</u>
Mailing Address <u>P.O. Box 735</u>	<u>5/15/08</u>	<u>\$ 184.95</u>
City, State, Zip Code <u>Brandon, MS 39043</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name <u>City of Brandon</u>	Date (Mo., Day, Year) <u>4/11/08</u>	Amount of each disbursement this period <u>\$ 500.00</u>
Mailing Address <u>1000 Municipal Dr.</u>	<u>1/1/08</u>	\$
City, State, Zip Code <u>Brandon, MS 39043</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name <u>Ad World Specialties</u>	Date (Mo., Day, Year) <u>4/28/08</u>	Amount of each disbursement this period <u>\$ 288.99</u>
Mailing Address <u>3403 Laurel Lane</u>	<u>5/18/08</u>	<u>\$ 288.99</u>
City, State, Zip Code <u>Pearl, MS 39208</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name <u>Northwest Rankin Y.J2 Assn.</u>	Date (Mo., Day, Year) <u>6/23/08</u>	Amount of each disbursement this period <u>\$ 300.00</u>
Mailing Address <u>P.O. Box 5176</u>	<u>1/1/08</u>	\$
City, State, Zip Code <u>Brandon, MS 39047</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name <u>Rankin Co. News</u>	Date (Mo., Day, Year) <u>8/14/08</u>	Amount of each disbursement this period <u>\$ 299.25</u>
Mailing Address <u>207 E. Government St</u>	<u>1/1/08</u>	\$
City, State, Zip Code <u>Brandon, MS 39043</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$